

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/519,346
Filing Date	August 22, 2005
First Named Inventor	De Winter, Rudi
Title	SINGLE PIN MULTILEVEL INTEGRATED CIRCUIT TEST INTERFACE
Art Unit	2117
Examiner Name	Dipakkumar B. Gandhi
Attorney Docket Number	016998-003600US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

20350

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

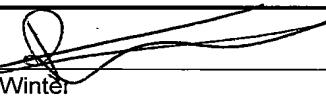
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature		Date 2008- Apr - 07
Name	Rudi De Winter	Telephone
Title and Company	CEO	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

61327413 v1